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FORM 489

ARMED FORCES IDENTIFICATION CARD-DU FORM 2 AF		<input type="checkbox"/> (Rec)	Card Serial No. (1)
		<input type="checkbox"/> (Rec)	<input type="checkbox"/> (Rec)
		<input type="checkbox"/> (Rec)	B-047713 AF 067219
First, Middle Name (Print or Type)	Grade	Service No.	
Francis C.	OFF-CIV-63-12	N/A	
Commission Date (or Commission)	Date of Birth	Height	Color Hair Color Eyes
N/A	17 Aug 29	165	69cm D Brown Brown
Blood Type O			

Reason for Issuing Card

A. Initial Appointment B. Recoincruitment upon expiration of commission

C. Transfer to Honorary Rcs D. Replace Lost card

E. Replace mutilated card F. Change of Identification

G. Correct Error

Address (Preferably military installation) at which I may be readily contacted

I certify that the above information is correct and true to the best of my knowledge and belief. In the event "A" above is checked, I certify that I have not been previously issued a DU (formerly I&E) Form 2AF. In the event "D" above is checked, certify that the DU (formerly I&E) Form 2AF previously issued to me was lost under following circumstances:

Francis C. Powers
Signature of Applicant (both copies)

Date of Application	Date of Issue (taken from card)	Receipt of the above card is acknowledged	
		Date	Signature (both copies)
		<i>8/6/50</i>	<i>Francis C. Powers</i>

To be filled in by Issuing Authority

F FORM 279

1 Nov 49 It replaces AF I&E Form 420, 1 Sep 49, in the Air Forces

U. S. Government Printing Office: 1950-0-899393

Francis G.	DAF-CIR-65-12	N/17			
Rank at time of Commission	Date of Birth	Weight	Height	Color Hair	Color Eyes
N/12	17 Aug 27	165	5'9 1/2	Dark	Brown
					Blood Type - O

Reason for Issuing Card

A. Initial Appointment B. Reappointment upon expiration of commission

C. Transfer to Honorary Rcs D. Replace lost card

E. Replace mutilated card F. Change of Identification

G. Correct Error

Address (Preferably military installation) at which I may be readily contacted

I certify that the above information is correct and true to the best of my knowledge and belief. In the event "A" above is checked, I certify that I have not been previously issued a DA (formerly MCE) Form 2AF. In the event "D" above is checked, certify that the DA (formerly MCE) Form 2AF previously issued to me was lost under the following circumstances

Francis G. Powers
Signature of Applicant (both copies)

No of Application	Date of Issue (taken from card)	Receipt of the above card is acknowledged	
		Date	Signature (both copies)
		<i>8/6/67</i>	<i>Francis G. Powers</i>

To be filled in by Issuing Authority

F FORM 279
1 Nov 69 It replaces AFM Form 420, 1 Sep 49, in the Air Forces

U. S. Government Printing Office: 1550-0-899393

Approved for Release
Date 12 SEP 1985

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FORM 484APPLICATION FOR IDENTIFICATION CARD-DO FORM 2 AF (Reg)Card Serial
No. (2)
AF067219 (IC) (Res)Last Name-First Name-Middle Name (Print or Type) Grade Service No
POWERS, Francis G. DAS/CIV CS-12 RAExpiration Date (or Commission) Date of Birth Height Height Color Hair Color Eyes
MA 17 Aug. 1929 165 5'9¹/₂ Brown Brown

Blood Type - O

Reason for Issuing Card

A. Initial Appointment B. Reappointment upon expiration of commission

C. Transfer to Honorary Rcs D. Replace Lost card

E. Replace mutilated card F. Change of Identification

G. Correct Error

Address (Preferably military installation) at which I may be readily contacted

I certify that the above information is correct and true to the best of my knowledge and belief. In the event "A" above is checked, I certify that I have not been previously issued a DO (formerly HCE) Form 2AF. In the event "D" above is checked, certify that the DO (formerly HCE) Form 2AF previously issued to me was lost under the following circumstances

Francis G. Powers
Signature of Applicant (both copies)

Date of Application	Date of Issue (taken from card)	Receipt of the above card is acknowledged	
28 April 1956		Date	Signature (both copies)
<u>Francis G. Powers</u>			

D) To be filled in by Issuing Authority

F FORM 279

1 Nov 49 Replaces DA AGO Form 420, 1 Sep 49, in the Air Forces

U. S. Government Printing Office 1950-6-699393